

STEVE CARTER
ATTORNEY GENERAL
OFFICE OF THE INDIANA ATTORNEY GENERAL
5th Floor - Indiana Government Center South
302 West Washington Street
Indianapolis, IN 46204

PROFESSIONAL SOLICITOR
CAMPAIGN FINANCIAL REPORT

Professional Solicitor's name: _____

Person to contact regarding this report: _____

Telephone number of contact person: _____

GENERAL INSTRUCTIONS

1. Answer all items completely. Do not leave questions blank. This form must comply with Indiana Code § 23-7-8-1 *et seq.* and 11 IAC 3-1 *et seq.*
2. This form must be filed with the Consumer Protection Division within ninety (90) days from the ending date of the charitable solicitation campaign and within ninety (90) days after the anniversary of the commencement of a solicitation campaign lasting more than one (1) year. *See* Indiana Code § 23-7-8-2(f). Extra copies of this form can be downloaded at www.state.in.us/attorneygeneral/consumer/charityfundraisers.html.

REPORT

1. Name of the charitable organization: _____

2. Type of report (check one below):

Anniversary:

☐

End of Campaign:

☐

3. Beginning and ending dates of the campaign:

Begin ____/____/____ End ____/____/____

4. If an anniversary report, the beginning and ending dates of the reporting period:

Begin ____/____/____ End ____/____/____

Beginning and ending dates of this reporting period: ____/____/____ - ____/____/____.

I affirm under the penalties for perjury that the foregoing representations are true and accurate.

Date Signed	Name of Registrant	
By:	(Signature)	
	(Printed Signature)	(Title)

NOTARY

STATE OF _____)
) SS:
COUNTY OF _____)

Subscribed and sworn to before me, a Notary Public in and for said County and State, this ____ day of _____, 20____.

My Commission Expires:

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File with: Office of the Indiana Attorney General
Consumer Protection Division
Attn: Fundraiser Registration
5th Floor - Indiana Government Center South
302 West Washington Street
Indianapolis, IN 46204-2770